



Maryland Overdose Response Program

Dispensing Protocol TEMPLATE

Naloxone is a prescription medication that must be stored and dispensed according to Maryland laws, and reported to the Department, as required by COMAR 10.47.08.10C¹.

Naloxone Management

- **Identify** the person responsible for ordering and receiving naloxone
- **Identify** where naloxone will be stored and secured
 - Naloxone must be stored in its original packaging at room temperature (between 59 – 86 degrees Fahrenheit)
- **Identify** the person responsible for oversight of naloxone stock, if it differs from above
- **Identify** how naloxone will be regulated, such as frequency of log book reviews and stock checks
- Once identified, expired or damaged naloxone will be disposed of in the trash, and any needles must be placed in a Sharps container.

Naloxone Dispensing

1. Dispenser will ensure expiration date of naloxone and provide naloxone kit to individual
 - **Identify** type of naloxone and (#) doses provided:
 - Intranasal – ☐ Amphastar pre-filled syringe ☐ Narcan intranasal device
 - Intramuscular – ☐ Hospira single dose vial ☐ Evzio auto-injector
 - **Identify** additional items in naloxone kit:
 - MAD Nasal delivery device for Amphastar product
 - 1-3 mL syringes, 1-1.5", 21-23 gauge needles for Hospira product
 - Gloves
 - Rescue breathing shield
 - Alcohol swabs
2. Dispenser will label naloxone container in accordance with Health Occupations §12-505²
 - Each naloxone container will be labeled with:
 - The date the prescription is filled; and
 - An expiration date of the drugs or devices which shall be the lesser of:
 - 1 year from the date of dispensing; or
 - The month and year the prescription expires;

Entity Name:

Date Submitted:

- Any appropriate special handling instructions regarding proper storage of the naloxone or devices; and
 - The name and strength of the naloxone as prescribed
 - The name of the individual
3. Dispenser will make a record of naloxone dispensing
- **Identify** how/in what system dispensing will be logged and the information collected, including:
 - Name of person dispensing naloxone
 - Date prescription dispensed
 - Name, date of birth, and address of individual receiving naloxone
 - Manufacturer, lot number & expiration date of medication
 - Number of doses dispensed
 - Initial or Refill → If refill, indicate reason

Record Maintenance and Reporting

- **Identify** the person responsible for checking logs of naloxone dispensing (this is typically, but not limited to, the ORP licensed health care provider)
- **Indicate** # of years records will be stored
 - Records must be stored a minimum of 5 years.
- If dispenser is aware of a naloxone administration, they must record the incident using the ORP Naloxone Use Report³ and email or fax to the Maryland Department of Health – Center for Harm Reduction Services. The email is mdh.naloxone@maryland.gov.
- Every month, the following information must be reported to Maryland Department of Health – Center for Harm Reduction Services through the web-based form:
 - Form of naloxone dispensed;
 - Number of initial doses of naloxone dispensed; and
 - Number of naloxone refills dispensed and reason given for each refill dispensed.